

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	NON-COMPETITIVE IMMUNOASSAY FOR SMALL ANALYTES
Attorney Docket Number::	3501-1097
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	3
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent	No
Appl.?::	

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FINLAND  
Status:: Full Capacity  
Given Name:: TIMO  
Middle Name::  
Family Name:: PULLI  
Name Suffix::  
City of Residence:: HELSINKI  
State or Province of  
Residence::  
Country of Residence:: FINLAND  
Street of Mailing MYLLYPELLONPOLKU 3 B 28  
Address::  
City of Mailing Address:: HELSINKI  
State or Province of Mailing Address::  
Country of Mailing Address:: FINLAND  
Postal or Zip Code of Mailing Address:: FI-00650

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FINLAND  
Status:: Full Capacity  
Given Name:: MATTI  
Middle Name::  
Family Name:: HOYHTYA  
Name Suffix::  
City of Residence:: HELSINKI  
State or Province of  
Residence::  
Country of Residence:: FINLAND  
Street of Mailing CALONIUKSENKATU 9 C 54  
Address::  
City of Mailing Address:: HELSINKI

State or Province of Mailing Address::  
Country of Mailing Address:: FINLAND  
Postal or Zip Code of Mailing Address:: FI-00100

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FINLAND  
Status:: Full Capacity  
Given Name:: KRISTIINA  
Middle Name::  
Family Name:: TAKKINEN  
Name Suffix::  
City of Residence:: ESPOO  
State or Province of  
Residence::  
Country of Residence:: FINLAND  
Street of Mailing Address:: HALTILANTIE 12 AS 1  
City of Mailing Address:: ESPOO  
State or Province of Mailing Address::  
Country of Mailing Address:: FINLAND  
Postal or Zip Code of Mailing Address:: FI-02200

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FINLAND  
Status:: Full Capacity  
Given Name:: HANS  
Middle Name::  
Family Name:: SODERLUND  
Name Suffix::  
City of Residence:: ESPOO  
State or Province of  
Residence::  
Country of Residence:: FINLAND  
Street of Mailing Address:: SALONKITIE 19

Address::

City of Mailing Address:: ESPOO

State or Province of Mailing Address::

Country of Mailing Address:: FINLAND

Postal or Zip Code of Mailing Address:: FI-02940

### Correspondence Information

Correspondence Customer 00466

Number::

### Representative Information

Representative Customer	00466
Number::	

### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/FI2003/000875	11/17/03

### Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FINLAND	20022048	11/18/02	Yes

**Assignment Information**

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::